

TRIP REPORT NO. NIS-1

**ASSESSMENT OF THE US/NIS
HOSPITAL PARTNERSHIPS PROGRAM**

June 19-July 7, 1994

Prepared under Task Order 012 by:
Diaa Hammamy

Submitted by the Zdrav*Reform* Program to:
AID/ENI/HR/HP

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I. BACKGROUND:

The American International Health Alliance (AIHA); which represents major hospitals and hospital-related organizations entered into a cooperative agreement with the United States Agency for International Development (USAID). Under this cooperative agreement AIHA has established 21 health care partnerships in ten of the New Independent States (NIS) of the former Soviet Union to allow the American providers to assist their counterparts in the NIS to address significant mortality and morbidity issues, improve health care organization and introduce market-oriented solutions to hospitals and health system delivery and finance problems.

There are twenty-one active partnerships under AIHA/USAID cooperative agreement. USA participants include 47 hospitals and health systems and 18 medical schools in 18 cities and 15 states; NIS participants include 42 hospitals and health systems and 12 medical universities in 17 cities and 10 republics.

The assessment team activities were not directed at specifically quantifying the accomplishment to date of the evolving programs, but rather at lessons learned to be applied to the modification of the partnerships program, based on current programmatic and strategic realities.

The assessment team consisted of:

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| 1- Mr. Arthur Mudge | Team Leader |
| 2- Dr. Paul Torrens | |
| 3- Ms. Annette Bongiovanni | |
| 4- Dr. Diaa Hammamy | |

The assessment was carried out between June 21 and July 7, 1994.

During the period June 21-27, Mr. Mudge and Dr. Hammamy traveled to Kazakhstan and Kyrgyzstan while Dr. Torrens and Ms. Bongiovanni travelled to Georgia, Armenia and St. Petersburg. The whole team met in Moscow and travelled together in Moscow and to Kiev/Ukraine. In Kiev the team members carried out some of the assessment individually in order to cover most of the partners.

II. PARTNERSHIPS VISITED:

The following is a summary of the activities carried by the NIS partners visited by Diaa Hammamy:

1. Tucson - Almaty Partnership

This a partnership between Tucson Medical Center and two Kazakh hospitals in Almaty, the Kazakh Science Research Institute of Pediatrics and the Almaty First Aid Hospital. This

partnership was built on a previously existing Sister City Agreement with Tucson. This partnership focuses on the following areas:

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| 1- Infection control | 2- Hospital administration |
| 3- Epidemiology | 4- Laboratory services |
| 5- Hematology | 6- Medical/Nursing education |
| 7- Toxicology | 8- Equipment repair and maintenance |
| 9- Cardiology | 10- Obstetrics |

Dr. A. Douisskeev, Deputy Minister of Health Services in Kazakhstan, expressed great satisfaction with the partnerships intensive activities which, according to the Deputy Minister, have accomplished a lot particularly in the areas of training, hospital administration and humanitarian aid. Dr. Douisskeev pointed out to the partnership training activities in the areas of cardiology, toxicology, management, nurse retraining and obstetrics as the most outstanding accomplishment of the partnership program. However, he would like to see more emphasis on maternal and child health services and on other major health problems that faces Kazakhstan such as: TB, HIV/AIDS, vaccination. Dr. Douissekeev would like to see the partnership program involved in the health care reform in kazakhstan by providing more training courses on health management and financing. In addition, he underscored the impact of the partnership program in portraying a very positive impact on the relationship between Kazakhstan and USA.

In two meetings with Dr. Urmurzina; the Head of Almaty City Health Administration; and her deputies they emphasized the importance of the partnership program to their health reform plans. Almaty Health administration is currently being reorganized using the management skills acquired both in the USA and NIS through the partnership program. This Reorganization plans will apply to 82 medical institutions throughout Almaty. However, they pointed out that they need some help from their partners in Tucson in preparing job descriptions and in defining the roles and responsibilities of their staff.

Dr. Urmurzina and her deputies reported that the partnership activities in the maternity hospital was instrumental in reducing maternal mortality, infant mortality and hospital-acquired infections. Almaty/Tucson Partnership program in the area of obstetrics and gynecology helped in establishing the use of surgical sterilization as a method of family planning which resulted in the reduction of abortion rates. As a result of the increased awareness of the infection control programs in the USA hospitals, Almaty City Hospital Administration established the position of infection control nurse in every hospital in Almaty as part of a new infection control program which resulted in the reduction of nosocomial infection.

Tucson/Almaty partnership is also involved in the emergency medical services (EMS) initiative. Almaty City Health Administration is planning on finishing the renovation of the EMS center in

September, 1994 and has already trained three trainers to start training other medical and non medical personnel (e.g. firemen, ambulance drivers) on emergency medical services.

In our visit to Almaty First Aid City Hospital we met with the director of the hospital, Dr. Birtanov and several physicians including the heads cardiology and toxicology departments. This hospital serves as the training base for Almaty medical college for nurses. According to Dr. Birtanov, the implementation of the knowledge and information acquired through the partnership program resulted in the reduction of the Average length of stay (ALOS) in the hospital from 20 days to 10 days. Moreover, as a result of the partnership initiatives the hospital has established an infection control program headed by the chief nurse and a patient education program in the cardiology department. A code blue emergency team similar to that in the USA hospitals was organized in the hospital.

The transfer of knowledge and technology was very helpful in the reorganization of the cardiology department. The newly acquired equipment and continuing education techniques were used in establishing a continuing education program for nurses on cardiac resuscitation which was until recently performed by physicians only.

Almaty First Aid City Hospital with the help of their USA partners established the first toxicology center in Kazakhstan equipped with a computer and has a telephone hot line accessible to the public. The center receives about 20 calls daily since its inception in late May 1994.

The hospital is planning on opening a 20-bed ward in July 1994 for the patients who are willing to pay for the services as a base for the fee for services that can be broadened in the future with the implementation of the new insurance law.

As an NIS partner, the Institute of Pediatrics in Almaty, Serves as the referral center for the critical cases from six maternity hospitals in Almaty. The partnership program is assisting the institute in its infection control program; which is headed by an epidemiologist; training of nurses and management training. The director of the institute reported that treatment of leukaemia in children is of a high priority to the institute. The institute is also involved in the efforts to implement a breast feeding program in Almaty and other parts of Kazakhstan.

Almaty Medical College for nurses is also an NIS partner. In our meeting with Dr. Ayapov, the director of medical college, he emphasizes the important role of the partnership in the development of curricula and educational materials and in the restructuring of their nurses education and training programs.

In general, The NIS participants in the partnerships listed the following gains as the most important outcomes of their partnership:

- * Training and Exchange of information
- * Introduction of new prevention and treatment techniques
- * The contact with specialists in the USA
- * The improvement and upgrading of the nurses education system.

- * The transfer of technology in the form of equipment and educational materials
- * The positive impact on the USA image in Kazakhstan.

Some of the future expectations from the partnership program as listed by the Kazakh partners are as follows:

- * Develop a family practitioner program
- * Focus on Maternal and child health services (MCH)
- * Long term training in the USA (three months min.)
- * Develop patient rehabilitation programs
- * Train staff from Kazakhstan in equipment maintenance
- * Continue the development and upgrading of nurses' training.

2. Kansas City - Bishkek Partnership

This is a partnership between The University of Kansas Medical Center and two Kyrgyz institutions in Bishkek, the Institute of oncology and radiology and the Institute of obstetrics and Pediatrics. The memorandum of understanding for this partnership was signed in Washington in October 1992. This partnership focuses on the following areas:

- 1- Hospital Administration 2- Neonatology
- 3- Infant rehabilitation 4- Labor and delivery
- 5- Diagnostic radiology 6- Pediatric oncology
- 7- Adult medical oncology 8- Pain control

Dr. K. Sbanbayev, Deputy Minister of Health in Kyrgyzstan, expressed great satisfaction with the partnership intensive activities which, according to the deputy Minister, which contributed to the health care reform in Kyrgyzstan particularly in the areas of training, management, financing policies and administration reorganization. Dr. Subanbayev emphasized that one of his objectives for the partnership is to establish a model for clinical education to train medical staff from different parts of Kyrgyzstan.

Dr. D. Kudayarov, the director of institute of obstetrics and pediatrics, stated that the new maternity hospital (100 beds) will be opened in July 1994. This new hospital, which is established during the course of the partnership, will help in the reduction of maternal mortality rates.

The institute serves as an educational center for the whole republic. It holds conferences, workshops and seminars for the medical staff in different specialties. The institute staff with the help of their USA partners have developed manuals for breast feeding, caring for premature babies and prevention of acute respiratory infections among several others. These manuals have been distributed all over Kyrgyzstan. The institute is also involved in research activities with its USA partners.

The obstetricians and gynecologist in the institute were trained in the surgical sterilization and the use of laparoscopes in the USA. Upon returning to Kyrgyzstan, they have started providing this services in the institute.

Dr. Kudayarov cited the following accomplishments resulting from the partnership activities:

- Training of the medical staff (doctors and nurses)
- Reduction on ALOS
- Reduction of hospital-acquired infection
- Reduction of new born (first 4 weeks of life) mortality
- The use of surgical contraceptives
- The provision of equipment and supplies

The institute of oncology in Bishkek is the second kyrgyz partner in this partnership. Dr. Z. Kamarli, the director on the institute reiterated the importance of training of the medical staff and the acquisition of diagnostic equipment in upgrading and improving the health services in Kyrgyzstan. Some members of the staff of the oncology institute were trained in the new techniques for diagnosis and treatment of pediatric oncology. the institute has received 30% of the components of the military hospital donated to Kyrgyzstan by USA. the institute is planning several research studies with the University of Kansas Medical Center. Dr. Kamarli reported a 40% reduction in the number of beds in the institute and he attributed half of this reduction to the partnership activities and the other half to economic difficulties.

The institute of oncology runs a hotel service for the families of the patients for a nominal fee of \$8/week/family.

There is a general agreement among the Kyrgyz partners that the most successful aspects of the partnership are as follows:

- Training and exchange of information
- Transfer of technology and educational materials
- Equipment and supplies
- Nurse education
- Positive impact on the USA image in Kyrgyzstan.

The Kyrgyz partners enumerated the following areas for improving the future activities of the partnerships:

- Long term training in the USA (3 months or more)
- Supplies (e.g. reagents, pharmaceuticals) and equipment
- Supply of contraceptives

3. Chicago - Moscow Partnership

This is a partnership between Premier Health Alliance, Inc. and the government Hospital of the Russian Federation (Kunseva). The memorandum of understanding for this partnership was signed in the summer of 1993. This partnership focuses on the following areas:

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| 1- Cardiology | 2- Hemodialysis |
| 3- Transplant surgery | 4- Hospital management |
| 5- Nursing, medical and allied health education 6- Insurance management. | |

Prior to 1990 the Kunseva hospital was part of a closed health care system devoted entirely to serve the members of the government and the party. But since 1990 this system has been open to the public and the foreigners who can afford to pay for the quality of services provided by the system. About 30% of the patients of the center are not government affiliated and they pay for the services. Revenues from patients' fees are used to supplement staff salaries, purchase equipment and pharmaceuticals and to maintain the facilities. The majority of the patients (70%) are government and parliament officials.

The hospital in Kunseva is very well equipped and the staff is well qualified and trained. However, they are still lagging in the areas of nurses' training and hospital management. The management of Kunseva hospital aspires to establish the hospital as the central training center in Russia. Training of the medical staff is the most important aspect of the partnership as cited by the Russian partners followed by information dissemination.

4. Pittsburgh - Moscow Partnership

This is a partnership between Magee-Women's Hospital, which is a large teaching facility affiliated with the University of Pittsburgh Schools of Medicine and Nursing, and the free-standing birth house of Savior's Hospital, the second largest municipal hospital in Moscow. The memorandum of understanding was signed in December 1992. The Pittsburgh-Moscow partnership focuses on the following areas:

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| 1- Maternal and child health | 2- Health care administer. |
| 3- Consumer and Community Education | 4- Birthing house Operation |
| 5- Volunteer and non-profit development. | |

This partnership assisted in the remodeling and reopening of the maternity ward and a new family center where the parents stay together with the infant. Expecting mothers and their families are the recipient of some health education classes in the center. In addition this partnership provided training opportunities for doctors and nurses both in Russia and the USA. This partnership is also involved in family planning education and social marketing for family planning methods which will be provided to the partnership by the USAID/PROFIT project at a price lower than the market price. The partners are trying to create a non-profit foundation for fund raising; they have established a gift shop at the hospital as a start.

5. INFECTION CONTROL - MOH/MOSCOW

In a meeting with the staff of the infection control division of the Russian federation Ministry of Health in Moscow they pointed out that due to the remarkable increase in the nosocomial infections and infectious diseases in the Russian Federation, MOH passed the regulatory order #220 which requires that each hospital creates the position of hospital epidemiologist to oversee infection control practices at each institution. Recognizing the need to assist the Russian partner institutions in improving infection control techniques AIHA sponsored a conference for representatives from all AIHA Russian partnerships and key city, oblast, regional and MOH officials. The staff of the infection control division of the Russian Federation MOH participated in the conference. MOH will work with AIHA partnerships as pilot projects to develop case definitions for each nosocomial infection, to make recommendation on the proper use of microbiology labs, and to determine whether it is more feasible to introduce microbiology labs in each hospital or to use separate regional labs which would provide services to local health care providers. The staff of the infection control division of the MOH were impressed by the performance of the American Faculty of the infection control conference and described it as "perfect" despite the fact that the team members have not worked together before. The staff of the infection control division of MOH listed the following issues as the ones of utmost importance for them:

- 1- Closer coordination with AIHA in identifying priorities and selection of partners.
- 2- Improving the quality of services.
- 3- Training of trainers.
- 4- Training of nurses.

The infection control division at MOH is collaborating with WHO and the USA's CDC.

6. Philadelphia - Kiev Partnership

This is a partnership between three major Philadelphia institutions; University of Pennsylvania School of Medicine, the hospital of the University of Pennsylvania and the Children's hospital of Philadelphia, and the left bank center for maternal and child health care in Kiev/Ukraine. The memorandum of understanding was signed in September 1992. The areas of the partnership focus are:

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| 1- Prenatal evaluation and ultrasonography | 2- Pediatric Nutrition |
| 3- Women's reproductive health | 4- Perinatal and neonatal care. |

The management of the center aspires to establish a model center for Maternal and child health services to be used as an example for establishing other MCH centers in the future. The director of the center

expressed interest in establishing a health information system in the center that will help in the development of a population health profile and the center's financial system .

III. MEASURES OF SUCCESS AND LESSONS LEARNED:

The US/NIS partnerships are intended to be one-on one relationship between NIS and US health care facilities with the goal of improving health care services to the NIS population. Some of the partnerships focus on specific groups of patients such as women and children while others focus on specific services such as cardiology, toxicology and emergency services. Regardless of specific partnership focus, all partnerships emphasize the improvement of clinical services and patient care both directly and indirectly by offering information, support, technology or management strategies.

Given the variation in needs, service availability, types of health care facilities and interests of participating institutions, the partnership programs vary in their scope and clinical emphases. Nonetheless, certain elements are common and could be used in the assessment of all the partnerships. These include utilization review, clinical outcomes assessment, assessment of the facility or system of care, information transfer/education and dissemination of information .

Several indicators were used to assess the partnerships. These indicators measure changes in the following areas:

1- Changes in utilization:

* The partnership program activities have resulted in the reduction of the number of beds in several of the NIS partner institutes in Kazakhstan and Kyrgyzstan. This reduction was 10% in 1993, in Bishkek, with an additional 15% reduction in the number of beds targeted for 1994. Some of the partnership institutes reported reductions of up to 40% in the number of beds. However, some of this reduction could be attributed to the economic difficulties facing the NIS partners.

* The average length of stay (ALOS) was reduced by 50%, from 20 days to 10 days on average, in Almaty First Aid City Hospital.

2- Improved clinical outcomes:

* The improvement in health services and practices brought about by the partnership program activities helped to reduce the infant mortality rate (IMR). The reported reduction in IMR (for newborn only) in Kyrgyzstan is i/1000 live births in one year, from 8.1/1000 live births in 1992 to 7.1/1000 live births in 1993. IMR was also reduced in Almaty due to the activities of the partnership program from 21.7/1000 live births in 1992 to 19.1/1000 live births in 1993.

* Several partnership institutes have adopted infection control programs and developed the necessary protocols. Some of the NIS partnership institutes have an infection control nurse and/or an epidemiologist in their staff.

* Emergency medical services' centers were/will be established and staffed with trained personnel in several republics of the NIS.

* In Almaty and Bishkek, there is reduction in the rate of abortion due to the introduction of surgical sterilization as a mean of family planning in the NIS partner institutes.

* Maternal mortality ratio was reduced 109.9/100,000 deliveries or pregnancies? in 1991 to 49.8 in 1993 largely due to the improvement in prenatal and obstetric care provided by the NIS partners.

* Establishment of patient education programs in the cardiology department of Almaty First Aid City Hospital.

* The production of manuals for breast feeding, caring for premature infants, prevention of acute respiratory infections (ARI) which is being used in training nurses and doctors all over Kyrgyzstan. These manuals were produced by the NIS partner with assistance from the US partner.

* The establishment of a code blue emergency team in Almaty First Aid City Hospital.

* The creation of a preventive anti alcoholism counseling center in Dubna.

* Several NIS partner institutes are now using better diagnostic techniques and equipment.

3- Administrative interventions:

Knowledge acquired in the USA and the management training during the AUPHA workshops were instrumental in the changes of management practices and administrative reorganization. The following are examples of the impact of the partnership program on health administration in the NIS:

* Reorganization of Almaty City Health Administration which will affect 82 medical institutions in Almaty.

* The introduction of a fee for service or service charges concept in Almaty First Aid City Hospital which will open a 20-bed ward for patient who are willing to pay for the services provided to them. Also, the director of the Oncology institute in Bishkek had established hotel services for the patients' families who come from outside Bishkek for a nominal fee of \$8/week/family.

4- Educational component:

A major component of the partnership program involves the exchange visits between the US and NIS partners, the training of the NIS medical personnel and the transmission of information and techniques to the NIS medical personnel. The following are examples of the successful educational activities that were/will be carried out by the partnership program:

- * Training of medical doctors and nurses in a wide range of specialties both in the USA and in the NIS. However, partnerships need to pay more attention to the training of nurses in order to allow and encourage them to improve their performance and carry on their clinical and administrative responsibilities adequately.
- * Assisting Almaty Medical College for nurses in organizing its education system and developing the necessary curricula.
- * Management training particularly the three regional workshops conducted by AUPHA.
- * Assistance with educational materials needed for the Alcoholism prevention center in Dubna.
- * The establishment of regional training centers such as the institute for obstetrics and pediatrics in Bishkek and Almaty First Aid City Hospital.

Despite the successful efforts by the partnership program in its educational component, there is a room for improvement particularly in the areas of training of nurses and of trainers in order to insure the long term impact on the health system. In addition, the ability of the NIS personnel who are directly involved in the partnerships to transmit their newly acquired knowledge and skills to others; the multiplier effect; has not been fully utilized.

5- Dissemination of information:

A major component of AIHA's strategy is to communicate among partners and disseminate the lessons learned and skills derived from the exchange program. AIHA communication strategy and products include newsletters, printed materials on a variety of clinical, policy and administrative issues, conferences, workshops, and an E-mail based bulletin board and shared information system.

(A) Conferences and workshops:

participants in the partnership program meet every six months to discuss common problems, to share experience, to discuss approaches to a full range of administrative, clinical and educational issues encountered in the NIS. In addition, special workshops are held to educate NIS partners on specific subjects and/or disseminate the clinical and administrative changes brought about in the NIS partnership hospital to a wider audience of NIS health care providers. These workshops and conferences are being conducted in a collaborative effort between AIHA and US partner institutions. These workshops and conferences dealt with several important issues such as: infection control, emergency medical services, neonatal resuscitation, gynecology and obstetrics, hospital administration

among several other topics. There is a general agreement among all the partner institutes in the NIS that hospital management and administration is one of the major weaknesses in the health care system in the NIS and that training in this area is of utmost priority. Almost all of the partners underscored the importance of the health management workshops that were conducted by AIHA in collaboration with the Association of University Programs in Health Administration (AUPHA). Three regional management workshops were held in L'viv, Moscow and Almaty. Some NIS partners raised some concern about these conferences and workshops in general being a one way channel of communication. They would like to see some NIS presenters and would like to be able to present their own experiences.

(B) CommonHealth publication:

CommonHealth which is a bi-monthly, bi-lingual newsletter is an important communication device relaying useful information about partnership activities as well as substantive clinical and administrative information to hospital administrators, physicians, researchers, policy makers both inside and outside the NIS. Due to the difficult economic situation in the NIS scientific journals and publication have become a rare and very valuable commodity. CommonHealth is responding, in a limited, to the need of scientific publication. Moreover, CommonHealth serves as a device for information dissemination by publishing the experiences of different NIS partner institutes and synopsis of the workshops and conferences. However, CommonHealth does not adequately address the needs of the nurses in the NIS.

(C) Electronic mail (E-mail):

Electronic mail is becoming a major method of communication and information sharing. AIHA considers E-mail and the related bulletin board to be the backbone of the information sharing and communication component. AIHA provides the NIS partners with the computer hardware and software and related training. If used properly, E-mail could be the most efficient and useful means of communication and information sharing. However, most of the NIS partner institutes visited by the assessment team did not use the E-mail system efficiently. E-mail was rarely used to exchange information between the NIS partners. Some of the NIS partners used E-mail to consult with their US partners and to receive scientific articles. Several NIS partners sighted the breakdown in the telephone lines as the main reason for not using E-mail efficiently.

VI. SUGGESTED ACTIVITIES FOR ZDRAVREFORM:

ZdravReform program can build on some of the partnerships' activities that are going on in several of the NIS partner institutes. The following are examples of the activities that can benefit from ZdravReform assistance:

1. Establishing a Health Information System in the left bank maternal and child health center in Kiev.

2. providing technical assistance in Curricula development and possibly a grant to the nursing medical college in Almaty.
3. providing the NIS partners with subscriptions; paid for by ZdravReform program; to some scientific journals for two or three years.
4. Collaborating with AUPHA in their management courses.

Dr Aman Douissekeev Deputy Minister
Tel: 331-683
Fax: 331-719

Dr. Gulshara Gazizovna Urmurzina Head
Tel: (O) 447-207 or 449-800
 (H) 338-009

Dr. Askhan Smailov Deputy
Tel: (H) 256-126
(O) 449-809
Fax: 444-602

Dr. Aleksandr Idorovich Kim Deputy

Dr. Orunkul Akhmetovna Alimbekova Chief Ob/Gyn.

Dr. Kamal Saruarovich Ormantaev Director
Tel:(O) 488-121 or 444-503
(H) 420-741

Dr. Omarnova Kulyan Omarnova Deputy

Dr. Zhana Kaskeshevna Sekenova Deputy

Dr. Amanti Birtanovich Birtanov Head Physician
Tel: (O) 627-071 or 624-131 or 622-066
 (H) 478-504

Dr. Vladimir Ivanovich Lapin Head of Intensive Cardiol.

Dr. Elenora Beisenova Head of toxicology Center

Dr. Naila Almagambetova Cardiologist

Dr. Galina Poddubnaya Toxicologist

Nurse Medical College:

Dr. Kalkaman Ayapov Director
Tel: (O) 622-803 or 625-629
(H) 396-953

Dr. Galina Beisenova
Tel: (O) 625-406 or 622-803
(H) 268-918

USAID/Almaty:

Ms. Paula Feeney General Development Officer

Ms. Marilyn Schmidt General Development Officer

Mr. Jonathan Addleton Program Officer

Dr. Murate E. Kuzhukeev General Development Officer

USA Embassy:

Mr. William Courtney Ambassador

AIHA:

Mr. Matthew E. Leafstedt Regional Director/CAR
Tel: (O) 625-381
Fax: (O) 624-998

Dr. Zhamilya S. Nugmanova Scientific Advisor
Tel: (O) 625-381 or 279-374 or 423-577
(H) 610-768
Fax: (O) 624-998 or 631-207

Ms. Sultanat AIHA/Almaty

Ms. Bebe Gool AIHA/Almaty

ASSOCIATION OF DOCTORS AND PHARMACISTS OF KAZAKHSTAN:

Ms. Aizhan B. Sadikova President
Tel: (O) 327-841 or 452-032
Fax: (O) 631-207

2- Kyrgyzstan:

Ministry of Health:

Dr. Kafan Subanbayev Deputy Minister

Institute of Pediatrics:

Dr. Duyshe Kudayrov Director

Dr. Orazaly Uzakov Deputy Director

Institute of Oncology:

Dr. Zakir Kamarli Director

USA Embassy:

Mr. Ed. Horwitz???? Ambassador

3- Russia

Moscow Sechenov Medical Academy:

Dr. Igor N. Denisov Head of Faculty

Dr. Pavel Salmanov Chief/Dep. of Management

Dr. Galna M. Perfiljeva Dean/School of High nursing

Dubna:

Arslan A. Mavlyanov Deputy Mayor

Ms. Svetlana Alekseevna Bertash

Main Moscow Health oblast Admin.

Kunseva Govenment Center of Russia:

| | |
|-------------------------|---|
| Dr. Yuri L. Perov | Director of Post graduate & research center |
| Dr. Fedor Tumanov | Chief Doctor of the central clinical hospital |
| Dr. Vladimir Makarovsky | Deputy Chief Doctor |
| Dr. Gennady N. Ushakov | Chief of polyclinic |

Savior's Hospital of Peace and Charity on Perovo:

| | |
|-------------------------|--|
| Dr. Alexander Goldberg | Chief physician/Head doctor |
| Dr. Vadim O. Lopukhin | Head physician of maternity hospital |
| Dr. Olga L. Trianina | Instructor/neonatologist |
| Ms. Rachel Mays | Magee-Women's Hospital/Field Rep. |
| Ms. Melissa R. Zahniser | Magee-Women's Hospital/Program assistant |
| Ms. Olga | Nurse |

Ministry of Health:

Dr. Inna Martinovna Timchakovskaya Infection Control Department

USAID/Moscow:

Dr. Jack Le Sar

AIHA:

| | |
|---------------------------|--------------------------------------|
| Mr. James P. Smith | Executive Director |
| Dr. Elena A. Bourganskaia | Deputy Regional Director/Moscow |
| Dr. Gennady Konovalov | Senior Medical Advisor |
| Ms. Phybee ?? | Regional Director/Moscow (departing) |
| Ms. Linda ??? | Acting Regional Director/Moscow |

4- Ukraine

AIHA:

Mr. Miron Fedoriw

Regional Director/Keiv

USAID/Kiev:

Ms. Ann AArnes

Mr. Victor Boguslavski

FSN/Health

Left bank center for maternal and child health care/Kiev:

Dr. Victor Didichenko

Director